



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1198

| | | | | |
|-----------------------------|--|--------------|------------------------|--|
| SERIAL NUMBER 10/507,515 | FILING OR 371(c) DATE 02/07/2005 RULE | CLASS 369 | GROUP ART UNIT 2655 | ATTORNEY DOCKET NO. 008312-0311886 |
|-----------------------------|--|--------------|------------------------|--|

APPLICANTS

Hideo Ando, Tokyo, JAPAN;
 Kazuo Watabe, Kanagawa, JAPAN;
 Hiroharu Sato, Tokyo, JAPAN;
 Hisashi Yamada, Kanagawa, JAPAN;
 Yuuji Nagai, Kanagawa, JAPAN;
 Chosaku Noda, Kanagawa, JAPAN;
 Yutaka Kashihara, Kanagawa, JAPAN;
 Akihito Ogawa, Kanagawa, JAPAN;
 Tadashi Kojima, Kanagawa, JAPAN;

**** CONTINUING DATA *******

This application is a 371 of PCT/JP03/03102 03/14/2003

**** FOREIGN APPLICATIONS *******

JAPAN 2002-72925 03/15/2002

JAPAN 2003-29078 02/06/2003

| | | | | | |
|---------------------------------|--|---------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY JAPAN | SHEETS DRAWING 44 | TOTAL CLAIMS 12 | INDEPENDENT CLAIMS 7 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

909

TITLE

Information recording medium and information recording/ reproducing device and method

| | | |
|-----------------------------|---|---|
| FILING FEE RECEIVED 1684 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------|---|---|